

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

						SERIAL NO.	FILING DATE		
						APPLICANT(S)			
						<i>I</i> CLAIMS			
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/		/				
2			/		/				
3			/		/				
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50									
TOTAL IND.	1		6		1				
TOTAL DEP.	17	↔	25	↔	10	↔			
TOTAL CLAIMS	18		34		11				

  

		*	*	*		
IND.	DEP.	IND.	DEP.	IND.	DEP.	
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100						
TOTAL IND.						
TOTAL DEP.		↔		↔		↔
TOTAL CLAIMS						

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SERIAL NO.	FILING DATE
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.	*
01									
02									
50									
54	1			1					
66									
67									
68									
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99									
100									
TOTAL IND.	4			4					
TOTAL DEP.	37			37					
TOTAL CLAIMS	41			41					

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office